FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT

1995

APPROVED

DOCUMENT # **N94000001220 (2)**

YOUTH AND FAMILY FOUNDATION OF FLORIDA, INC.

Principal Place of Business	Mailing Address
820 E. PARK AVE. SUITE D-100 TALLAHASSEE FL 32301	820 E. PARK AVE SUITE D-100 TALLAHASSEE FL 32301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/11/1994

3a. Date of Last Report:

4. FEI Number: 59-1696847 — Applied For ☐ Not Applicable ☐

2. Principal Place of Business	2a. Mailing Address	5. Certificate of Status Desired ☒	$8.75 Additional Fee Required
21 2728 Pablo Ave	26 2728 Pablo Ave		
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
City & State 23 Tallahassee FL	City & State 28 Tallahassee FL	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	$68.75 Supplemental Fee Not Required
ZIP 24 32308 County 25 U.S.A.	ZIP 29 32308 County 30 U.S.A	8. *This corporation has liability for intangible tax under S. 199.032,* Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CARD, CHRISTOPHER J 820 E. PARK AVE. SUITE D-100 TALLAHASSEE FL 32301	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 2728 Pablo Ave 83 84 City Tallahassee FL 85 ZIP Code 32308

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE (Registered Agent) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL OFFICERS AND DIRECTORS	
Title	D	41 Title	☐ Change ☐ Addition
Name	MENDUNI, MARGIE	42 Name	
Street Address	3604 N. MERIDIAN RD.	43 Street Address	
City-St-ZIP	TALLAHASSEE FL 32312	44 City-St-ZIP	
Title	D	45 Title	☐ Change ☐ Addition
Name	FREGLEY, TERRENCE	46 Name	
Street Address	1801 N. MERIDIAN RD.	47 Street Address	
City-St-ZIP	TALLAHASSEE FL 32303	48 City-St-ZIP	
Title	D	49 Title	☐ Change ☐ Addition
Name	LINNAN, NANCY	50 Name	
Street Address	P.O. BOX 190 N/A	51 Street Address	
City-St-ZIP	TALLAHASSEE FL 32302	52 City-St-ZIP	
Title		53 Title	☐ Change ☐ Addition
Name		54 Name	
Street Address		55 Street Address	
City-St-ZIP		56 City-St-ZIP	
Title		57 Title	☐ Change ☐ Addition
Name		58 Name	
Street Address		59 Street Address	
City-St-ZIP		60 City-St-ZIP	
Title		61 Title	☐ Change ☐ Addition
Name		62 Name	
Street Address		63 Street Address	
City-St-ZIP		64 City-St-ZIP	

14. I hereby certify that the information supplied with this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 above or on an attachment with an address.

SIGNATURE: (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) 4/27/95 (Date)

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